This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09/472958						4 A 11 1 1 A A A		
		(ັນ(est Avo	ailable Co	
Total Fee Calculation								
	Fee Code	Total # Claims	Number Extra	<u> </u>	Fee	Fee	= Total	
	Sm./Lg.				Sm. Entity	Lg. Entity		
Basic Filing Fee	201/101	_					= <u>/le</u> 0	
Total Claims >20	203/103	-20 =		X			= ,	
Independent Claims >3	202/102	.3 =		х			=	
Mult. Dep Claim Present	204/104		•				=	
Surcharge	205/105 .						= 130/1.5	
English Translation	139				`		·	
TOTAL FEE CALCULA	ATION						89V,	
Fees due upon filing t	the application:							
Total Filing Fees Due	s = \$	078						
Less Filing Fees Subn	mined - \$	⊘			Best	Availo	able Copy	
BALANCE DUE	= \$	890	· · · , , · · · · · · · · · · · · · · ·					
Sm C Office of Initial Paten	t Examination					•		
		I- i g	gure 7					

FORM OIPE-RAM-01 (Rev. 12/97)